

# **PATENT APPLICATION FEE DETERMINATION RECORD** Substitute for Form PTO-875

10700319

## **CLAIMS AS FILED - PART I**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

SMALL ENTITY	
RATE	FEE
\$	
x \$	
x \$	
+ \$	
TOTAL	

OTHER THAN SMALL ENTITY	
RATE	FEE
\$	
x \$	
x \$	
+ \$	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## **CLAIMS AS AMENDED - PART II**

4-8-05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	Minus	=
	Independent (37 CFR 1.16(b))	Minus	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))		

SMALL ENTITY	
RATE	ADDITIONAL FEE
x \$ 25	
x \$ 100	
+ \$	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
x \$ 50	200.00
x \$ 200	800.00
+ \$	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	Minus	=
	Independent (37 CFR 1.16(b))	Minus	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))		

SMALL ENTITY	
RATE	ADDITIONAL FEE
x \$	
x \$	
+ \$	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
x \$	
x \$	
+ \$	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	Minus	=
	Independent (37 CFR 1.16(b))	Minus	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))		

SMALL ENTITY	
RATE	ADDITIONAL FEE
x \$	
x \$	
+ \$	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
x \$	
x \$	
+ \$	
TOTAL ADD'L FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-1599 and select option 2.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. 41942-05546	
Applicant(s): MORTZ, Margaret S.						
Application No. 10/700,319	Filing Date November 3, 2003	Examiner Not Yet Assigned	Customer No. 25231	Group Art Unit 3736	Confirmation No. 5097	
Invention: PULSE OXIMETRY SpO2 DETERMINATION						
<b>COMMISSIONER FOR PATENTS:</b>					RECEIVED CENTRAL FAX CENTER APR 08 2005	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	24	20	4	x \$18.00	\$72.00	
INDEP. CLAIMS	6	3	3	x \$88.00	\$264.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$336.00</b>	
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 50-1419 in the amount of \$336.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1419 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
05/10 2005 THAKIM 00000001 50-1419-1/70319 01 FC: 5202 02 FC: 1201						
Kent A. Fischmann, Esq. Registration No. 35,511 MARSH FISCHMANN & BREYFOGLE LLP 3151 South Vaughn Way, Suite 411 Aurora, Colorado 80014 (720)562-5501						
Dated: April 8, 2005 Signature: <i>Kent A. Fischmann</i>						
CERTIFICATE OF TRANSMISSION BY FACSIMILE I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING TRANSMITTED TO THE UNITED STATES PATENT AND TRADEMARK OFFICE VIA FAX NO. 703-872-9106 ON April 8, 2005. Signature of Person Mailing Correspondence: <i>Patricia S. Simon</i>						